PTO/SB/17 (12-04)

Under the Berwork Reduction Act	of 1995 no pers	ons are required to re	U.S. Paten	t and Trademark	Office: U.S. DEPA	7/31/2006. OMB 06 ARTMENT OF COM a valid OMB control	MERCE
Effective on 12/08/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nur	nber 10/66	10/660,101		
FEE TRANSMITTAL			Filing Date		September 10, 2003		
For FY 2005			First Named Inv	ventor Richa	Richard R. Bott et al.		
				Examiner Name Lora Elizabeth Barnhart			
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	1651			
TOTAL AMOUNT OF PAYMENT (\$) 120.00		Attomey Docke	t No. DOC	DOC 0056 IA/35319.1			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Number: Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	ING FEES. Small Er	SEAF	RCH FEES Small Entity	EXAMINAT	ION FEES		
Application Type Fee	(\$) Fee (\$	- /4		Fee (\$)	Fee (\$)	Fees Paid (\$	1
Utility 30	0 150	500	250	200	100		
Design 20	0 100	100	50	130	65		_
Plant 20	0 100	300	150	160	80		_
Reissue 30	0 150	500	250	600	300		
Provisional 20	0 100	0	0	0	0		_
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100							
Multiple dependent claims		Fee (\$) Fee					180
Total Claims Extra	<u>Paid (\$)</u>	Multiple De	<u>pendent Claims</u> Fee Pai	-			
HP = highest number of total claims		1 ee (4)	10074	<u>u 141</u>			
Indep. Claims Extra		Fee (\$) Fee	<u>Paid (\$)</u>				
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
Other: Request for 1 month extension of time 120.00							0
SUBMITTED BY	, 1//	/					==
Registration No. 29.001 Telephone (937) 449-6400							

SUBMITTED BY
Signature
Registration No. (Attorney/Agent) 29,001
Telephone (937) 449-6400
Date May 10, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.